



APPLICATION FOR HAZARDOUS MATERIALS TRANSPORTATION LICENSE

CHP 361M (REV. 01-00) OPI 062

Please print or type

REASON FOR APPLICATION <input type="checkbox"/> Initial license (\$100.00) <input type="checkbox"/> New license - majority change in ownership or control (\$100.00) <input type="checkbox"/> Renewal (\$75.00) <input type="checkbox"/> Late renewal (\$100.00) <input type="checkbox"/> Duplicate-license lost or destroyed (\$5.00) <input type="checkbox"/> Replacement - correction or change of name and/or address only (no fee attach current license) <input type="checkbox"/> Amended - minority change in ownership or control (no fee)	APPLICANT NAME (COMPANY NAME)		FEDERAL EMPLOYER I.D. NUMBER (EIN) (IF NONE, LEAVE BLANK)		
	OWNERSHIP INFORMATION (MARK ONLY ONE) <input type="checkbox"/> CORPORATION <input type="checkbox"/> LIMITED LIABILITY COMPANY (LLC) <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> INDIVIDUAL - PROVIDE DRIVER'S LICENSE NUMBER AND STATE:				
	IF THIS IS A NAME CHANGE, ENTER PREVIOUS NAME		TELEPHONE NUMBER (INCLUDE AREA CODE)		
	ADDITIONAL NAME THE COMPANY IS DOING BUSINESS AS (IF NO DBA LEAVE BLANK)		MAIL LICENSE ATTENTION:		
	MAIN OFFICE STREET ADDRESS		CITY	STATE	ZIP CODE
	MAILING ADDRESS (If different from applicant address)		CITY	STATE	ZIP CODE
CALIFORNIA CARRIER IDENTIFICATION NUMBER CA-	CHP HAZARDOUS MATERIALS TRANSPORTATION LICENSE NUMBER AND EXPIRATION DATE	ICC NUMBER (IF APPLICABLE) MC MX	US DOT NUMBER (IF APPLICABLE)	CALIFORNIA CORPORATION NUMBER (IF APPLICABLE)	

SPECIALIZED HIGHWAY ROUTING REQUIREMENT INFORMATION

HAZARDOUS MATERIAL SHIPMENTS INDICATED BELOW ARE SUBJECT TO SPECIALIZED ROUTING REQUIREMENTS. TO BE PLACED ON THE APPROPRIATE MAILING LIST(S) TO RECEIVE COPIES OF THE ROUTE MAPS AND ASSOCIATED REQUIREMENTS RELATED TO EACH CATEGORY, CHECK ALL APPLICABLE BOXES.

- ☐ (HMX) Explosives subject to Division 14, California Vehicle Code (CVC).
- ☐ (HMPIH) Poison Inhalation Hazard material in bulk packagings subject to Division 14.3, CVC.
- ☐ (HRCQ) Highway Route Controlled Quantity radioactive materials subject to Division 14.5, CVC.
- ☐ None of the above (subject only to the general routing requirements contained in Section 31303, CVC, and Section 397.67 of Title 49, Code of Federal Regulations).

APPLICANT BACKGROUND (REQUIRED RESPONSES)

YES * NO

a. Has the applicant or any company officer ever been issued a similar license/permit by the Department of California Highway Patrol, another California state agency, or an agency of another state or the federal government? (Other than a renewal of this license)		
b. Has the applicant or any company officer ever had any similar license/permit denied, suspended, or revoked by the Department of California Highway Patrol, another California state agency, or an agency of another state or the federal government?		
c. Has the applicant or any officer ever been a partner, officer, director or controlling shareholder in a company or corporation whose license/pe was denied, suspended, or revoked by the Department of California Highway Patrol, another California state agency, or an agency of another state or the federal government?		
d. Has the applicant ever had their authority to transport hazardous materials shipments, for which the display of placards is required, suspended or an agency of the federal government?		

* EXPLAIN ALL YES ANSWERS ON THE REVERSE SIDE OF THIS FORM

CERTIFICATION INFORMATION

It is agreed that the licensed activity will be conducted in compliance with all applicable laws and regulations, and that the applicant is aware of all applicable California laws and regulations pertaining to motor carrier safety and hazardous materials transportation. It is understood that violation of any law or regulation may result in the filing of a criminal action in a court of law or the filing of an administrative action to suspend or revoke the license. It is also understood that misrepresentation of a material fact in conjunction with this application is a misdemeanor of the California Vehicle Code and may result in denial or revocation of the license.

AUTHORIZED CERTIFIER'S SIGNATURE	PRINT OR TYPE NAME AND TITLE	DATE
----------------------------------	------------------------------	------

CHP ACCOUNTING USE ONLY

CHP HAZARDOUS MATERIAL LICENSING UNIT USE ONLY

DATE	AMOUNT	CHECK DATE	LICENSE NUMBER	CONTROL NUMBER
CASHIER		CHECK NUMBER	ISSUE DATE	EXPIRATION DATE

LICENSEE NAME AND MAILING ADDRESS

CHP
USE
ONLY

ATTENTION:

MAIL THE ORIGINAL COMPLETED FORM(S)
WITH REQUIRED FEE TO:

CALIFORNIA HIGHWAY PATROL
P.O. BOX 942902
SACRAMENTO, CA. 94298-2902

DESTROY PREVIOUS EDITIONS